Approved for use through 03/31/2008. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no pe	rsons are required to respond to a colle	ection of information unless it displays a valid OMB control number.
	Application Number	10/720,843
TRANSMITTAL	Filing Date	November 24, 2003
FORM	First Named Inventor	SCHWARTZ, David A.
	Art Unit	1654
(to be used for all correspondence after initial filling)	Examiner Name	RUSSEL, Jeffrey E.
Total Number of Pages in This Submission 3	Attorney Docket Number	WSOL-1049812 (formerly SOL.003.DIV1)
ENCLOSURES (Check all that apply)		
Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences
Amendment/Reply	Petition Petition to Convert to a	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
After Final	Provisional Application	Proprietary Information
Affidavits/declaration(s)	Change of Correspondence A	Address Status Letter
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):
Express Abandonment Request	Request for Refund	Statement under 37 CFR 3.73b
Information Disclosure Statement	CD, Number of CD(s) Landscape Table on CI	
Castified Cassu of Briggity		,
Certified Copy of Priority Document(s)	Remarks	
Reply to Missing Parts/ Incomplete Application		
Reply to Missing Parts		
under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name Gorgon & Rees LLP		
Signature Sur HOULL		
Printed name David B. Waller		
Date H/1/09	F	Reg. No. 43,978
CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature Joyle Kalzman		
Typed or printed name   Gayle F. Katzmann: I hereby certify this paper is being   Date   4 / 4/0 \$/		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to \$\frac{1}{2}\$ to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the gathering, preparing, and summitting the completed application from to the USF/ID. I mer will vary depending upon the individual case. Any comments on the amount of time upon require to complete this form and/or suggestions for reducing this burden, a bload be sere to the Chief Informatical Commence, P.O. Box 1460, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Commissioner for Patients, P.O. Box 1460, Alexandria, VA 22313-1450.